

BAYOU HEALTH

Transformational Changes in Louisiana's Medicaid Program



**Advocate's Conference
October 14, 2011**

**Ruth Kennedy
Louisiana Medicaid Managed Care
Program**

Overview of Presentation

- The Case for Medicaid Service Delivery Change
- Guiding Principles in Design and Development
- Who Will (and Will Not) Be Impacted
- What Will (and Will Not) Be Impacted
- “So what does it mean for me me?????”

Our Medicaid “Burning Platform”



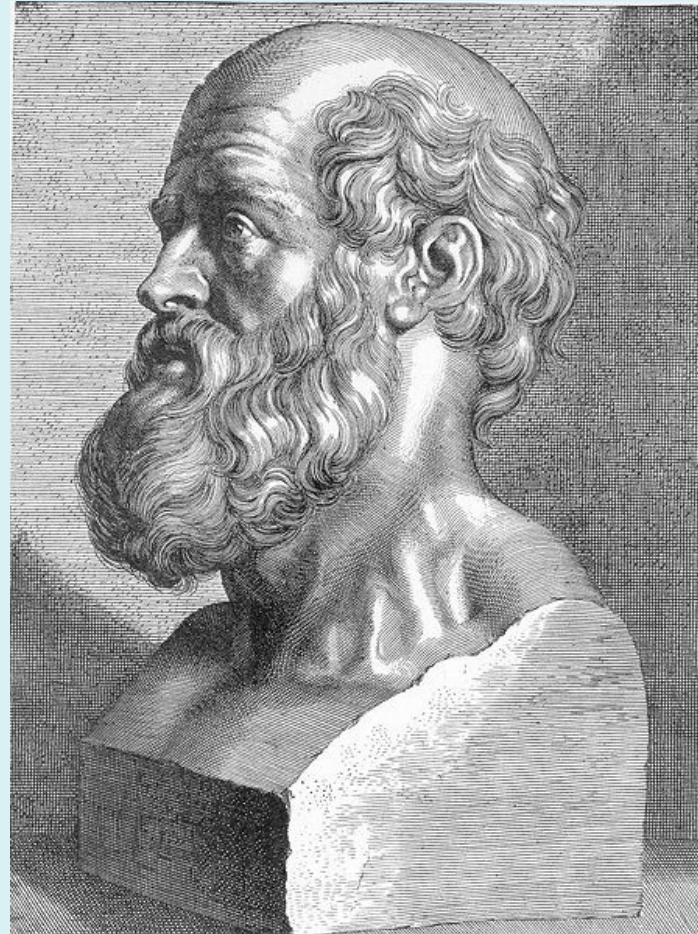
- ⦿ Care coordination is fragmented
- ⦿ Overall poor quality and minimal accountability
- ⦿ Quantity is rewarded over quality care
- ⦿ Access is limited for specialists
- ⦿ Inefficient utilization of services
- ⦿ Lack of flexibility in Medicaid fee-for-service model
- ⦿ Infrastructure for major expansion in 2014

BAYOU HEALTH is First and Foremost About Our Enrollees

- Better quality and improved health outcomes
 - More focus on prevention
 - Better coordination of care (specialists, dental, behavioral health)
 - Interventions to actively manage chronic illnesses
 - Comprehensive patient-centered medical home
- Increased access
 - Enforceable time and distance requirements
 - Rates can be negotiated with specialists
 - Prepaid plans can contract with providers not willing to enroll in LA Medicaid
- Allows additional benefits for enrollees
 - Expanded benefits (Prepaid only)
 - Incentives for compliance with care recommendations
 - Incentives for healthy behaviors

Objective # 1 in Designing BAYOU HEALTH

***Primum
non
nocere***



BAYOU HEALTH Compared to Traditional Medicaid

- Reduction in avoidable hospitalizations
- Reduction in hospital readmissions
- Reduction in preterm births and neonatal cost
- Reduction in emergency room costs
- Reduction in duplicative services
- Improved outcomes through early detection and treatment

People Will Have Choices

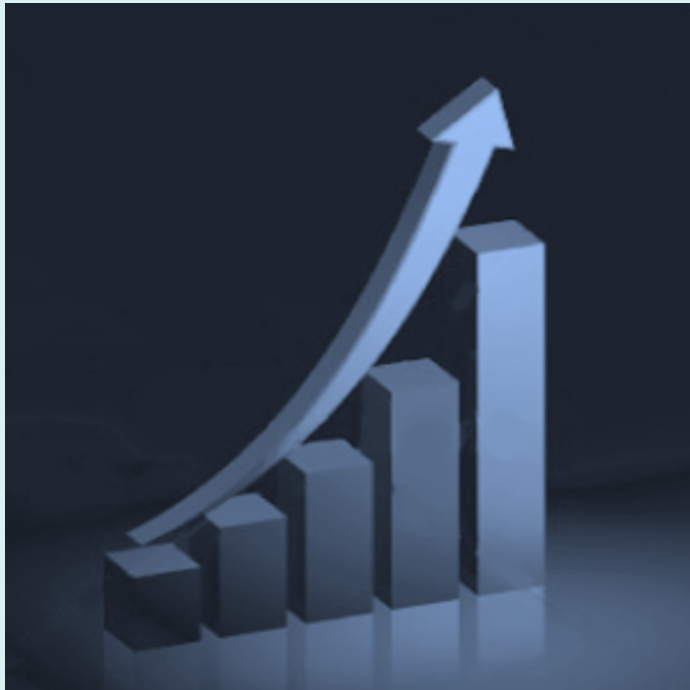
- Five statewide BAYOU HEALTH plans
 - Amerigroup
 - Community Health Solutions
 - LaCare [AmeriHealth Mercy]
 - La Healthcare Connections
 - UnitedHealthcare of La
- Differences in the five plans
 - Referral policies
 - Health management programs
 - Extra benefits offered
 - Network providers
- Choice of providers within the BAYOU HEALTH plan selected to the extent possible



Assuring Protections for Medicaid & LaCHIP Members

- Contracts require adherence to detailed grievance and appeals requirements
- Members have the right to appeal
 - To their BAYOU HEALTH plan (Prepaid plans)
 - To request a State fair hearing
- Monetary penalties for excessive reversals of plan decision as a result of a subsequent State fair hearing
- BAYOU HEALTH Consumer Ombudsman
- Marketing requirements and prior approval
- Rigorous monitoring of all complaints, grievances and appeals

“Upping the Ante” on Medicaid and CHIP Quality



- Expectation that quality will improve
- Incentives (and disincentives) tied to meeting quality goals
- Performance tracking for **thirty seven** quality measures

Fourteen Years of Outreach to Enroll Louisiana's Uninsured



- Importance of **simple** written materials
- Need for consistent message from **multiple** sources
- If you build it, they **may** come
- Outreach and education efforts in Louisiana produce **desired** results!

What is BAYOU HEALTH ?

“A health care delivery system that provides a continuum of evidence-based, quality-driven health care services in a cost effective manner.”



Which Medicaid Enrollees Will This Affect?

Mandatory Enrollees

Same groups as
CommunityCARE, but also
includes—

- Pregnant women
- Enrollees age 65 and older



Approximately 900,000 mandatory enrollees

Voluntary Enrollees

- Children receiving SSI or services through OPH Special Needs Clinics
- Foster children and children in State custody
- Native Americans who are members of a federally-recognized tribe
- We want them to receive the benefits of better care coordination and access to specialists
 - Will be included by default but may opt out
 - If they opt out of the CCN, they will be in traditional Medicaid

Excluded Enrollees



- Medicare dual eligibles
- *Chisholm* class members
- Persons in nursing and DD facilities
- HCBS waiver recipients, regardless of age or waiver
- Persons receiving hospice services
- Recipients enrolled in LaHIPP premium reimbursement

If status of member changes to one of the above, they will revert to FFS effective the first day of following month.

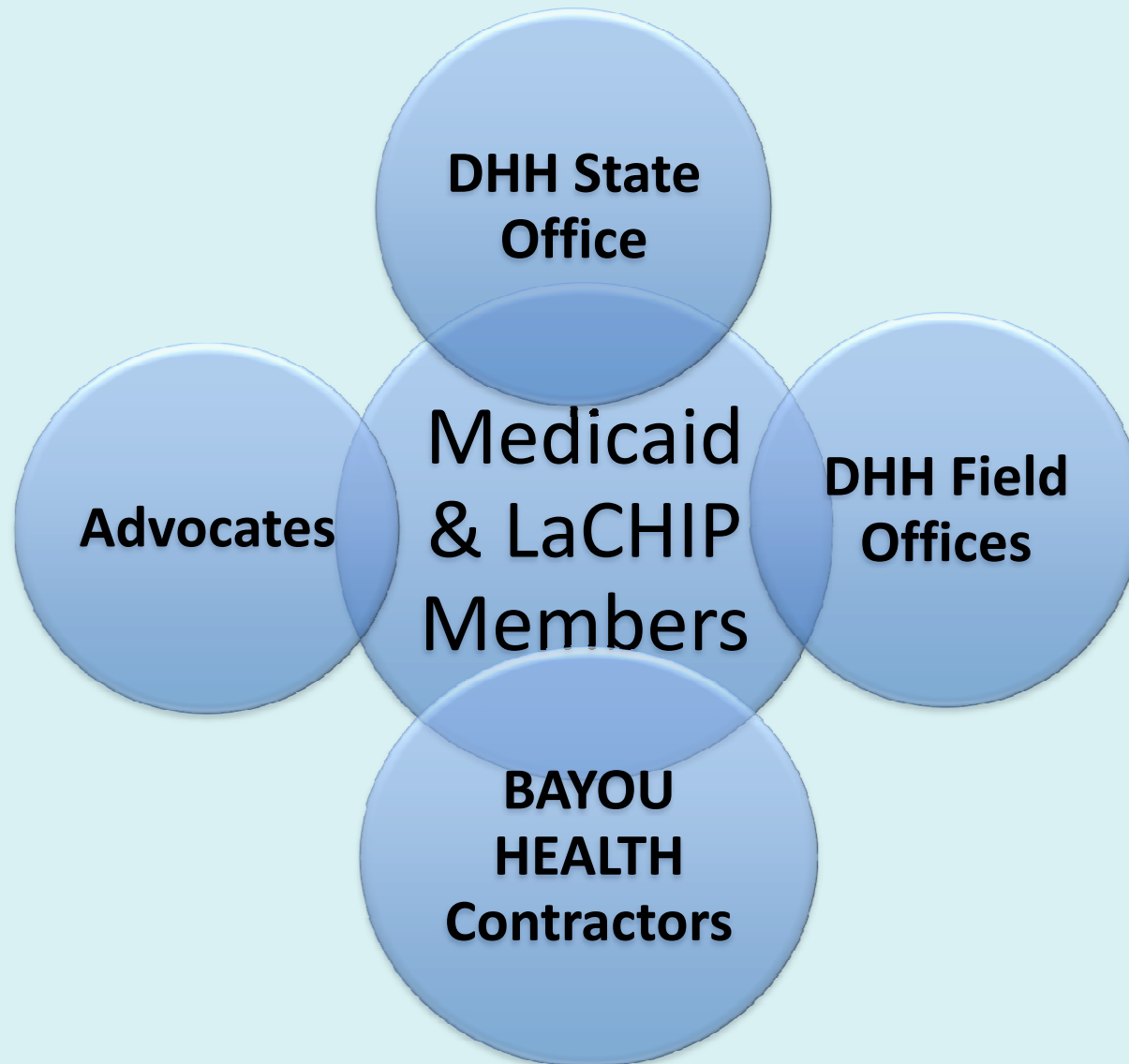
BAYOU HEALTH “Carve Outs”



Carve outs will continue to be fee-for-service

- Pharmacy
- Dental
- Specialized Behavioral Health
- All Hospice
- Targeted Case Management
- PCS (EPSDT and LTC)
- All Nursing Facility Services
- IEP Services Billed Through School Districts

It Really Will “Take a Village”



Opportunities for Those Who Work with Medicaid Enrollees to Assist



- Training on BAYOU HEALTH changes
- Integration of BAYOU HEALTH awareness and education into existing operations
- Opportunities to assist with outreach and enrollment

BAYOU HEALTH's Commitments

- Primary focus will, **first and foremost** be Medicaid and LaCHIP enrollees
- **Continuous** improvement
- Ongoing health plan rigorous monitoring and **accountability**
- **Transparency**



Working Together, We **Can** Improve Health Outcomes & Quality of Life!



We highly value and need your perspective!

Please share your comments and concerns.

www.MakingMedicaidBetter.com